

PTO/SB/17 (10-07)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 1,960.00
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Complete if Known	
Application Number	10/543,082-Conf. #1172
Filing Date	July 21, 2005
First Named Inventor	Andreas Reinhard
Examiner Name	J. F. Hook
Art Unit	3754
Attorney Docket No.	27793-00099USPX

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number:	23-2426		
		Deposit Account Name: Winstead PC		

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity	
Fee (\$)	Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

210 105

Multiple dependent claims

370 185

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
45	- 43 = 2	x 50.00	= 100.00

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	- 3 =	x	=

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for response within third month	1,050.00
1801 Request for continued examination (RCE)	810.00

SUBMITTED BY

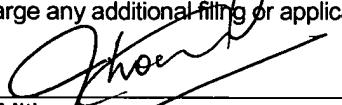
Signature		Registration No. (Attorney/Agent)	61,654	Telephone	(214) 745-5403
Name (Print/Type)	Shoaib A. Mithani		Date	February 8, 2008	

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 8, 2008

Signature: (Toni Watkins)



AMENDMENT TRANSMITTAL LETTER				Docket No. 27793-00099USPX
Application No. 10/543,082-Conf. #1172	Filing Date July 21, 2005	Examiner J. F. Hook	Art Unit 3754	
Applicant(s): Andreas Reinhard et al.				
Invention: ANTI-BUCKLING DEVICE FOR THIN-WALLED FLUID DUCTS				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
Total Claims	45	- 43 =	2	x 50.00 100.00
Independent Claims	1	- 3 =	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within third month Request for Continued Examination (RCE)				1,050.00 810.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				1,960.00
<input checked="" type="checkbox"/> Large Entity		<input type="checkbox"/> Small Entity		
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. 23-2426 in the amount of \$ 1,960.00 A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 23-2426 as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: February 8, 2008				
 Shoaib A. Mithani Attorney/Agent Reg. No.: 61,654				
WINSTEAD PC P.O. Box 50784 Dallas, Texas 75201 (214) 745-5403				
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Dated: February 8, 2008 Signature: <u>Toni Watkins</u> (Toni Watkins)				